

Approved, SCAO

**STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTY**

PERFORMANCE BOND

CASE NO.

Friend of the Court address

Telephone no.

Plaintiff's name, address, and telephone no.

Attorney:

v

Defendant's name, address, and telephone no.

Attorney:

1. Amount of bond: \$ _____

TERMS AND CONDITIONS

2. I will pay \$ _____ per _____

on my support account.

3. I will inform the friend of the court of my mailing address and any changes in that address.

4. I will inform the friend of the court of the name and address of my employer or any other source of income and any changes of employer or other source of income.

5. I will replenish the bond when it is used for arrearages.

6. Other terms and conditions:

I have read and agree to the above terms and conditions.

I understand that if I fail to perform all of the terms and conditions of this bond, all or part of the bond may be forfeited.

Date

Signature

☐ Plaintiff

☐ Defendant

RECEIPT

Received bond in the amount of \$ _____ .

Date

Signature

Title